



## BARS AND CIVIC ORGANIZATION REQUIREMENTS

This sheet must be completed for all new bars. If this is a change of ownership, you must also complete this form but you will be held to the plumbing code at the original time of permitting until the facility is expanded or changes use.

DATE: \_\_\_\_\_  
STAFF: \_\_\_\_\_

PROPOSED # OF SEATS: \_\_\_\_\_

PROPOSED # OF

PROJECT  
NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PERSON TO CONTACT: \_\_\_\_\_ PHONE \_\_\_\_\_

\_\_\_\_\_ Floor plans of facility provided and drawn to scale. Scale must be shown on the floor plan.

\_\_\_\_\_ Utility bill showing sewer charges or letter of sewer connection provided.  
If facility is on septic, answer next line.

\_\_\_\_\_ Facility is on septic. Must fill out Existing System Verification OR modify existing annual  
operating permit if applicable.

\_\_\_\_\_ 49 dollars paid to the OCHD for initial plan review fee.

\_\_\_\_\_ 1 toilet shown on floor plan for every 40 patrons.

\_\_\_\_\_ Must show both men's and women's restrooms on floor plan.

\_\_\_\_\_ 1 hand wash sink shown on floor plan for every 75 patrons in each restroom.

\_\_\_\_\_ 1 water fountain shown on site plan for every 500 patrons.

\_\_\_\_\_ 1 mop sink shown on floor plan.

\_\_\_\_\_ Number of pool tables / video games.

\_\_\_\_\_ Three compartment sink in the bar area. Also needed in kitchen area for civic organizations.

\_\_\_\_\_ Hand wash sink in the bar area. Also needed in kitchen area for civic organizations.

Y/N Is this a civic organization that prepares food? Please keep in mind that food preparation is  
not permitted in bar facilities. Bars are permitted to serve prepackaged food and "bar"  
type food only.

\_\_\_\_\_  
Signature, Owner / Owner's Representative \_\_\_\_\_ Date

Orange County Health Dept.  
800 N Mercy Dr, #1 Orlando, FL 32808



Environmental Health Phone (407) 521-2630  
Fax (407) 445-7493 Website -orchd.com/evh

